DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: ST COLETTA OF WISCONSIN FREDERICK AVENUE (0009198)

Address: 414 FREDERICK AVE, FORT ATKINSON, WI 53538

License Status: REGULAR

Licensed/Certified/Registered 02/02/2001

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0095423 End Date: 08/23/2005 Type: ABBREVIATED Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090827 End Date: 07/28/2003 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006875 Served 08/20/2003

		<u>Compliance</u>	
Deficiencies Cited	Subject Area	<u>Verified</u>	Corrected
88.05(4)(b)1	FIRE SAFETY-SMOKE DETECTORS	08/23/2005	Yes
88.06(2)(a)	ADMISSION-HEALTH EXAM	08/23/2005	Yes
88.06(2)(b)	SERVICE AGREEMENT EXCEPT RESPITE	08/23/2005	Yes

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